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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7 Chapter 11
	Chapter 12 Chapter 13

#### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name	Neenah	
	First name	First name
Write the name that is on your government-issued	M	
picture identification (for	Middle name	Middle name
example, your driver's	Lasalle	
license or passport	Last name	Last name
Bring your picture	0.00	
identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you have used in the last	First name	First name
8 years		
_	Middle name	Middle name
Include your married or maiden names.		
maiden names.	Last name	Last name
	First name	First name
		-
	Middle name	Middle name
	Last name	Last name
	Last name	Last name
3. Only the last 4 digits of your Social	XXX - XX- <u>3552</u>	xxx - xx-
Security number or federal Individual	OR	OR
Taxpayer	9 xx - xx-	9 xx - xx-
Identification number (ITIN)		

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D	ebtor 1 Neenah First Name	M Lasalle  Middle Name Last Name	(	Case number (if known)	
		About Debtor 1:		About Debtor 2 (Spouse C	Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or E	EINs.	I have not used any busin	ess names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name		Business name	
	8 years	Business name		Business name	
	Include trade names and doing business as names	EIN		EIN	
		EIN		EIN	
5.	Where you live			If Debtor 2 lives at a differen	it address:
		5036 1/2 Washington Blvd Apt: 209  Number Street  Apt 209		Number Street	
		Chicago Illinois 606		City	7in Codo
		City State Zip C	Code	City State	Zip Code
		County		County	_
		If your mailing address is different from above, fill it in here. Note that the court wi notices to you at this mailing address.		If Debtor 2's mailing address fill it in here. Note that the countries mailing address.	
		Number Street		Number Street	
		Cit. Chair	in Code	City. Chale	7in Ondo
_		City State Zi	ip Code	City State	Zip Code
6.	Why you are choosing this district	Check one:		Check one:	
	to file for bankruptcy	Over the last 180 days before filing this p lived in this district longer than in any oth	er district.	lived in this district longer	-
		I have another reason. Explain. (See 28 U	J.S.C. §§ 1408.)	I have another reason. Exp	olain. (See 28 U.S.C. §§ 1408.)
					·
		-			

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Debtor 1 Neenah	M	Lasalle	Case number (if known)			
First Name	Middle Name	Last Name				
Part 2: Tell the Court Abo	out Your Bankruptcy C	ase				
7. The chapter of the Bankruptcy Code you are choosing to file under		description of each, see <i>Notice Req</i> 0)). Also, go to the top of page 1 and				
8. How you will pay the fee	<ul> <li>✓ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court f more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash cashier's check, or money order If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.</li> <li>☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).</li> <li>☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments), you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.</li> </ul>					
9. Have you filed for bankruptcy within the last 8 years?	No.  Yes. District  District  District	When When When	MM / DD / YYYY  MM / DD / YYYYY  Case r	number		
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	V No.  Yes. Debtor District Debtor District	<u>W</u> hen	Case I	onship to you number, if known onship to you number, if known		
11. Do you rent your residence?	✓ No. Go to	ord obtained an eviction judgment a bline 12. at <i>Initial Statement About an Eviction</i> ankruptcy petition.				

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Lasalle Debtor 1 Neenah M \_\_ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have  $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1
 Meenah
 M
 Lasalle
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Neenah First Name		Lasalle Cas	e number (if known)				
	estions for Reporting Purposes						
16. What kind of debts do you have?	16a. Are your debts primarily "incurred by an individual No. Go to line 16b. Yes. Go to line 17.  16b. Are your debts primarily	consumer debts? Consur primarily for a personal, far business debts? Business nvestment or through the o	mer debts are defined in 11 U.S.C. § 101(8) as mily, or household purpose."  s debts are debts that you incurred to obtain operation of the business or investment.  her debts or business debts.				
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that f	•	any exempt property is excluded and administrative oute to unsecured creditors?				
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000				
19. How much do you estimate your assets to be worth?		\$1,000,001-\$10 \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$10	0 million				
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 \$10,000,001-\$5 \$50,000,001-\$1 \$100,000,001-\$	0 million				
Part 7: Sign Below	11		Control Hard Hart Consultant and All Line and				
For you	correct.  If I have chosen to file under Chof title 11, United States Code. under Chapter 7.  If no attorney represents me an	napter 7, I am aware that I m I understand the relief avail d I did not pay or agree to p	of perjury that the information provided is true and hay proceed, if eligible, under Chapter 7, 11,12, or 13 lable under each chapter, and I choose to proceed hay someone who is not an attorney to help me fill utilized by 11 U.S.C. § 342(b)				
	out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.						
	/s/ Neenah Lasalle Signature of Debtor 1		Signature of Debtor 2				
	Executed on 6/21/2017 MM / DE	)/YYYY	Executed on				

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Debtor 1 Neenah	M	Lasalle	Case number (if k	(nown)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed und	der Chapter 7, 11, 12	2, or 13 of title 11, United	ave informed the debtor(s) about I States Code, and have explained the Iso certify that I have delivered to the
If you are not	debtor(s) the notice requ	ired by 11 U.S.C. §	342(b) and, in a case in w	hich § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge after	r an inquiry that the	information in the sched	ules filed with the petition is incorrect.
attorney, you do not	4.0			
need to file this page.	/s/ Elizabeth Placek		Date	6/21/2017
	Signature of Attorney f	for Debtor	M	M / DD / YYYY
	Elizabeth Placek			
	Printed name			
	Semrad Law Firm			
	Firm name			
	20 S. Clark Street			
	Street			
	28th Floor			
	281111001			
	Chicago		Illinois	60603
	City		State	Zip Code
	•			·
	Contact phone	3124477838	Email address	eplacek@semradlaw.com
			_	
			Illinois	
	Bar number		State	

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Fill in this infor	mation to identify your ca	ase:	
Debtor 1	Neenah	М	Lasalle
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	sankruptcy Court for the:	Northern	District of Illinois
			(State)
Case number (If known)			

П	Check if this is an
	amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	<u>·</u>
1b. Copy line 62, Total personal property, from Schedule A/B	\$2,052.00
1c. Copy line 63, Total of all property on Schedule A/B	\$2,052.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$12,162.00
Your total liabilities	\$12,162.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	\$1,673.58 ————————————————————————————————————
5. Schedule J: Your Expenses (Official Form 106J)	\$1,800.00

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Deb	otor 1 Neenah	M	Lasalle	Case number (if known)							
	First Name	Middle Name	Last Name								
Part	4: Answer These Qu	estions for Administrat	ive and Statistical Records								
6. <b>A</b>	are you filing for bankrupt	cy under Chapters 7, 11, o	r 13?								
[	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.										
[	✓ Yes.										
7. <b>V</b>	Vhat kind of debt do you h	nave?									
[			mer debts are those incurred by a fill out lines 8-10 for statistical pur	n individual primarily for a personal, poses. 28 U.S.C. § 159.							
[		imarily consumer debts. You ith your other schedules.	ou have nothing to report on this p	part of the form. Check this box and su	ıbmit						
		our Current Monthly Incom Form 122B Line 11; <b>OR</b> , Fo	e: Copy your total current monthly orm 122C-1 Line 14.	y income from Official	\$1,879.45						
9.	Copy the following spec	ial categories of claims fro	om Part 4, line 6 of Schedule E/l	F:							
	From Part 4 on Schedule	e E/F, copy the following:	Total claim								
	9a. Domestic support obli	gations (Copy line 6a.)		\$0.00							
	9b. Taxes and certain other	er debts you owe the govern	ment. (Copy line 6b.)	\$0.00							
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  \$0.00											
	9d. Student loans. (Copy	\$1,271.00									
	9e. Obligations arising our priority claims. (Copy line		r divorce that you did not report a	\$0.00							
	9f. Debts to pension or pr	ofit-sharing plans, and other	\$0.00								

\$1,271.00

9g. Total. Add lines 9a through 9f.

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Fill in this	informa	tion to identify your ca	ase:					
Debtor 1	_	leenah	М		Lasalle			
Debtor 2	F	irst Name	Middle N	ame	Last Name			
(Spouse, if fi	ling) F	irst Name	Middle N	ame	Last Name			
United Sta	ates Ban	kruptcy Court for the:	Northern		District of Illinois			
		,			(State)			
Case num (If known)	nber _							
Officia	J For	m 1064/D						Check if this is an
Officia	ıı FOI	m 106A/B						amended filing
Sche	dule	A/B: Prope	rty					12/1
category v responsible write your	where y le for su name a	ou think it fits best. E applying correct inform and case number (if k	se as complete a mation. If more s nown). Answer e	nd ac pace very c	asset only once. If an asset fits in more curate as possible. If two married peop s needed, attach a separate sheet to t uestion. • Other Real Estate You Own or H	ole are this fo	e filing together, both a orm. On the top of any a	re equally
				_	residence, building, land, or similar pr			
7. Do you		to Part 2	uitable liiterest i	ii aiiy	residence, building, faild, or similar pr	operi	y:	
	Yes. W	here is the property?						
		,		Wha	t is the property? Check all that apply.		Do not deduct secured	claims or exemptions. Put
1.1	011	dalara Managaria	Here de la Callera		Single-family home			red claims on Schedule D: ims Secured by Property.
	Street address, if available, or other descrip		otner description		Duplex or multi-unit building			, ,
				$\blacksquare$	Condominium or cooperative		Current value of the entire property?	Current value of the portion you own?
				ш	Manufactured or mobile home			-
	Numbe	er Street			and		Describe the nature o	f your ownership
				ш	Timeshare		interest (such as fee s the entireties, or a life	
	City	State	Zip Code	H	Other			
					has an interest in the property? Check	<	Check if this is co	mmunity property
				one.	Debtor 1 only			
					Debtor 2 only			
				Ħ	Debtor 1 and Debtor 2 only			
					At least one of the debtors and another			
					er information you wish to add about the	nis ite	m, such as local	
If you	own or	have more than one, lis	st here:	prop	erty identification number:			
ii you	OWII OI	nave more than one, it	or more.	Wha	t is the property? Check all that apply.		Do not deduct secured	claims or exemptions. Put
1.2	Stroot	address, if available, or	other description		Single-family home		,	red claims on Schedule D: ims Secured by Property.
	Olloct	adicos, ii availabio, oi v	outer description		Duplex or multi-unit building		Current value of the	Current value of the
				$\blacksquare$	Condominium or cooperative  Manufactured or mobile home		entire property?	portion you own?
					Land			-
	Numbe	er Street		ш	nvestment property		Describe the nature o	
					Timeshare		interest (such as fee s the entireties, or a life	
	City	State	Zip Code		Other			
				Who	has an interest in the property? Check	<	Check if this is co (see instructions)	mmunity property
				one.				
					Debtor 1 only			
				$\blacksquare$	Debtor 2 only Debtor 1 and Debtor 2 only			
				$\blacksquare$	At least one of the debtors and another			
					er information you wish to add about th	nis ite	m, such as local	
					erty identification number:		, ,	

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Debtor 1		М	Lasalle	_ Case number	(if known)	
	First Name	Middle Name	Last Name			
	et address, if available, or ot		What is the property? Check all that a  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land  Investment property	pply.	the amount of any secu Creditors Who Have Cla. Current value of the entire property?  Describe the nature of	-
City	State		Timeshare Other  Who has an interest in the property? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ano Other information you wish to add all property identification number:	ther	check if this is co (see instructions)	estate), if known.
2. Add	the dollar value of the po	·	all of your entries from Part 1, included	ding any entries	s for pages	
	ve attached for Part 1. Wr	-	-			
Do you ov you own t 3. Cars, va ✓ No	hat someone else drives. If y ans, trucks, tractors, sport ut	equitable interes you lease a vehicle,	at in any vehicles, whether they are ralso report it on Schedule G: Executory rcycles	-	-	
3.1	s Make Model: Year:		Who has an interest in the propone.  Debtor 1 only	erty? Check	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and  Check if this is community p		Current value of the entire property?	Current value of the portion you own?
3.2	Make Model: Year: Approximate mileage:		Who has an interest in the propone.		the amount of any secu Creditors Who Have Cla	claims or exemptions. Put used claims on Schedule D: aims Secured by Property.
	Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community p instructions)		Current value of the entire property?	Current value of the portion you own?

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btor 1	Neenah First Name	M Middle Name	Lasalle Last Name	Case number	er (if known)	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is communinstructions)	ly s and another	the amount of any secu	claims or exemptions. Pured claims on Schedule Lims Secured by Property.  Current value of the portion you own?
3.4	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is communication.	ly s and another	the amount of any secu	claims or exemptions. Pured claims on Schedule Linims Secured by Property.  Current value of the portion you own?
	nples: Boats, trailers, motors No Yes	•	recreational vehicles, other fishing vessels, snowmobiles, r  Who has an interest in the pone.	notorcycle accessori	Do not deduct secured	claims or exemptions. Pured claims on <i>Schedule</i> is
	Year: Approximate mileage: Other information:		Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is communication.	and another		Current value of the portion you own?
4.2	Make Model:		who has an interest in the pone.  Debtor 1 only		the amount of any secu	claims or exemptions. P
	Year: Approximate mileage: Other information:		Debtor 2 only  Debtor 1 and Debtor 2 on	ly	Current value of the entire property?	Current value of the portion you own?

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Lasalle Debtor 1 Neenah Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Furniture \$300.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... (2)TV (1)Cellphone \$400.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothes** \$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Used Jewelry \$100.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1300.00 for Part 3. Write that number here .....

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Lasalle Debtor 1 Neenah Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: PNC Bank 17.1. Checking account: \$1.00 <u>\$</u>1.00 17.2. Checking account: Green Dot Pre-Paid Debit Card 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture % of ownership: Name of entity Yes. Give specific information about

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Debt	tor 1 Neenah	M	Lasalle	Case number (if known)	
	First Name	Middle Name	Last Name	· · · · · · · · · · · · · · · · · · ·	
20.	Negotiable instruments i	orate bonds and other negotiab include personal checks, cashiers' ents are those you cannot transfer Issuer name:	checks, promissory no	tes, and money orders.	
21.			, thrift savings accounts	s, or other pension or profit-sharing plans	
	✓ No	Type of account:	Institution name:		
	Yes. List each account		Institution name:		
	separately.	401(k) or similar plan:			
		Pension plan:			
		IRA:			
		Retirement account:			
		Keogh:			
		Additional account:			
		Additional account:			
22.		deposits you have made so that with landlords, prepaid rent, public Electric:			
		Heating oil:			
		Security deposit on rental unit:	Security Deposit with I	Landlord	\$750.00
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:			
		Other:			
23.	Annuities (A contract fo	or a periodic payment of money to	you, either for life or for	a number of years)	
	✓ No  Yes	Issuer name and description:			
					-

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Debt	or 1 Neenah First Name		salle Case number (if known)	
24.			BLE program, or under a qualified state tuition program.	
	26 U.S.C. §§	530(b)(1), 529A(b), and 529(b)(1).		
	✓ No Yes	Institution name and description. Separately file the	e records of any interests.11 U.S.C. § 521(c):	
25.		able or future interests in property (other than a property to the strain and a property (other than a property to the strain and a strain and	anything listed in line 1), and rights or powers	
	<b>✓</b> No			
	Yes. Desc	ribe		
26.	Patents, con	yrights, trademarks, trade secrets, and other in	tellectual property	
		ernet domain names, websites, proceeds from royal		
	✓ No  Yes. Desc	riha		
	L Tes. Desc	iibe		
27.	Licenses, fra	nchises, and other general intangibles		
		lding permits, exclusive licenses, cooperative assoc	iation holdings, liquor licenses, professional licenses	
	✓ No  Yes. Desc	ribe		
Mor	ney or propei	ty owed to you?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
	ney or prope			portion you own? Do not deduct secured
	Tax refunds o	wed to you	Federal	portion you own?  Do not deduct secured claims or exemptions.
	Tax refunds or  No Yes. Give sabou	wed to you specific information t them, including whether	Federal:	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds or  No Yes. Give about	wed to you specific information	State:	portion you own? Do not deduct secured claims or exemptions.  \$0.00
28.	Tax refunds or  No Yes. Give about your and to	specific information t them, including whether already filed the returns t	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds or  No Yes. Give sabout you a and s  Family support Examples: Past	specific information t them, including whether already filed the returns t	State:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds or  No Yes. Give sabout you a and to  Family support Examples: Past	specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, spousal support, child	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds or  No Yes. Give sabout you a and to  Family support Examples: Past	specific information t them, including whether already filed the returns t	State:  Local: support, maintenance, divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds or  No Yes. Give sabout you a and to  Family support Examples: Past	specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, spousal support, child	State:  Local: support, maintenance, divorce settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t  \$0.00
28.	Tax refunds or  No Yes. Give sabout you a and to  Family support Examples: Past	specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, spousal support, child	State:  Local: support, maintenance, divorce settlement, property settlement Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t  \$0.00
28.	Tax refunds or  No Yes. Give sabout you a and to  Family support Examples: Past	specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, spousal support, child	State:  Local:  support, maintenance, divorce settlement, property settlement  Alimony:  Maintenance:  Support:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00  \$0.00  t  \$0.00 \$0.00
28.	Tax refunds or  No Yes. Give s about you a and to  Family suppor Examples: Past No Yes. Give s  Other amount Examples: Unp	specific information t them, including whether already filed the returns he tax years	State: Local: support, maintenance, divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement: benefits, sick pay, vacation pay, workers' compensation,	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds or  No Yes. Give s about you a and to  Family suppor Examples: Past No Yes. Give s  Other amount Examples: Unp	specific information t them, including whether already filed the returns he tax years	State: Local: support, maintenance, divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement: benefits, sick pay, vacation pay, workers' compensation,	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds or  No Yes. Give s about you a and t  Family suppor Examples: Past  No Yes. Give s  Other amount Examples: Unp Soc	specific information t them, including whether already filed the returns he tax years   t due or lump sum alimony, spousal support, child specific information  s someone owes you aid wages, disability insurance payments, disability ial Security benefits; unpaid loans you made to some	State: Local: support, maintenance, divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement: benefits, sick pay, vacation pay, workers' compensation,	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Neenah	M	Lasalle	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance paramples: Health, disabil		ings account (HSA); credit, I	nomeowner's, or renter's insurance	
	Yes. Name the insurr of each policy and list	ance company	pany name:	Beneficiary:	Surrender or refund value:
32.		y that is due you from some			
	If you are the beneficiary property because someo		ds from a life insurance polic	cy, or are currently entitled to receive	
	✓ No  Yes. Describe				
33.	Examples: Accidents, em	rties, whether or not you ha ployment disputes, insurance		a demand for payment	
	Yes. Describe				
34.	Other contingent and u	unliquidated claims of every	nature, including counter	claims of the debtor and rights	
	No Yes. Describe				
35.	Any financial assets yo	u did not already list			
	Yes. Describe				
36.		all of your entries from Part umber here			\$752.00
Part	5: Describe Any Bu	siness-Related Property	You Own or Have an I	nterest In. List any real estate in Part	:1.
37.	Do you own or have any	y legal or equitable interest	in any business-related p	operty?	
	No. Go to Part 6. Yes. Go to line 38.			<b>p</b> D	current value of the ortion you own? to not deduct secured claims rexemptions
38.		commissions you already e	arned		
	Yes. Describe				
39.	Office equipment, furni Examples: Business-relat		ems, printers, copiers, fax m	achines, rugs, telephones, desks, chairs, elect	ronic devices
	No Yes. Describe				

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Deb	tor 1 Neenah	M	Lasalle	Case number (if known)	
10	First Name	Middle Name	Last Name	a two do	
40.	machinery, fixtures, e	equipment, supplies you	use in business, and tools of y	our trade	
	<b>✓</b> No				
	Yes. Describe				
11	Inventory				
71.					
	<b>✓</b> No				
	Yes. Describe				
42.	Interests in partnersh	nips or joint ventures			
		.,,,			
			Name of entity:	% of ownership:	
	Yes. Give specific information about		•	·	
	them			<u> </u>	<u> </u>
					_
43.	Customer lists, mailing	lists, or other compilat	ions		-
		,			
	No N		-l- infotion ( dofined in 44	11.0.0. \$ 101/414/10	
	Yes. Do your lists i	nclude personally identifial	ole information (as defined in 11	U.S.C. § 101(41A))?	
	No				
	Yes. Desc	ribe			
44.	Any business-related	property you did not alr	eady list		
	<b>✓</b> No				
	Yes. Give specific				<del>_</del>
	information				<del>_</del>
					<u> </u>
45 A	dd the dollar value of	all of your entries from D	art 5 including any entries for	nages you have attached	
			art 5, including any entries for		
<u> </u>					
Part		arm- and Commercian interest in farmland, list it i		y You Own or Have an Interest In.	
46.	Do you own or have a	iny legal or equitable int	erest in any farm- or commerc	cial fishing-related property?	
	No. Go to Part 7.				Current value of the portion you own?
	Yes. Go to line 47				Do not deduct secured claims
	_				or exemptions
47.	Farm animals	ander form of the Col			
	Examples: Livestock, p	ouitry, farm-raised fish			
	<b>✓</b> No				
	Yes. Describe				
	_				
1					

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Debto	or 1 Neenah	M	Lasalle	Case number (if known)	
	First Name	Middle Name	Last Name		
48.	Crops-either growing	or harvested			
	<b>✓</b> No				
	Yes. Describe				
	Tes. Describe				
49	Farm and fishing equ	ipment, implements, machinery, fi	xtures, and tools of trade	e	
	_	,			
	✓ No				
	Yes. Describe				
		<del></del>			
50.	Farm and fishing sup	plies, chemicals, and feed			
	<b>✓</b> No				
	Yes. Describe				
51.	Any farm- and comm	ercial fishing-related property you	did not already list		
	<b>№</b> No				
	Yes. Describe				
	Tes. Describe				
				ſ	
		all of your entries from Part 6, incl		= =	
or Pai	rt 6. Write that numbe	er here			
Part 7	Describe All Pr	operty You Own or Have an In	terest in That You Did	d Not List Above	
		operty of any kind you did not alrea	ady list?		
	Examples: Season ticke	ets, country club membership			
	<b>✓</b> No				1
	Yes. Give specific				
	information				
-4 4 1	ulation deller of the set		. that a subarabase		
54. Ad	d the dollar value of a	all of your entries from Part 7. Writ	e that number here		
B 10	Liet the Tetale	of Fook Dout of this Forms			
Part 8	LIST THE TOTALS	of Each Part of this Form			1
55 <b>D</b>	art 1: Total real estat	te, line 2		•	
00.1	art ir rotar roar oota.				
56 <b>n</b> :	art 2 total vehicles, li	ne 5			
1		and household items, line 15			
57.16	art o. Total personal a	ind nousehold items, line 15	\$1300.00	<u></u>	
58. <b>P</b> a	art 4: Total financial a	assets, line 36	\$752.00		
59. <b>P</b>	art 5: Total business-	related property, line 45	·	<del></del>	
				<u> </u>	
60. <b>P</b>	art 6: Total farm- and	I fishing-related property, line 52		<u></u>	
61. <b>P</b>	art 7: Total other pro	perty not listed, line 54			
62 T	otal nersonal propert	y. Add lines 56 through 61			
52.	o.a. porociiai propert	J. 7. a.a. iii 100 00 anough 01	\$2052.00	Copy personal property total	+ \$2052.00
				Copy personal property total	
					\$2052.00
63. <b>T</b> c	otal of all property on	Schedule A/B. Add line 55 + line 62			

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Fill in this information to identify your case:						
Debtor 1	Neenah	М	Lasalle			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)			
Case number (If known)			(Giaio)			

#### Official Form 106C

### Check if this is an amended filing

#### Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	t 1: Identify the Property You Clair	n as Exempt		
1.	Which set of exemptions are you claimi	ng? Check one only, ev	ven if your spouse is filing with you.	
	You are claiming state and federal	nonbankruptcy exemp	otions. 11 U.S.C. § 522(b)(3)	
	You are claiming federal exemption	ns. 11 U.S.C. § 522(b)(	2)	
2.	For any property you list on Schedule A	/B that you claim as e	exempt, fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
	Brief description: Checking account, PNC Bank Line from	\$1.00	\$1.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
	Schedule A/B: 17			
	Brief description:  Used Furniture  Line from Schedule A/B:  06	\$300.00	\$300.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
3.	✓ No	ery 3 years after that for	375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case?	

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Lasalle Debtor 1 Neenah M Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property own Check only one box for each exemption. Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$400.00 description: **✓** \$400.00 (2)TV (1)Cellphone 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(a) Brief \$500.00 description: **✓** \$500.00 **Used Clothes** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$1.00 description: **✓** \$1.00 Checking account, 100% of fair market value, up to any **Green Dot Pre-Paid Debit Card** applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$100.00 description: \$100.00 **Used Jewelry** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$750.00 description: **✓** \$750.00 Security deposit on 100% of fair market value, up to any rental unit, Security applicable statutory limit **Deposit with Landlord** 

Line from Schedule A/B:

22

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			9			
Fill in this infor	mation to identify your o	case:				
Debtor 1	Neenah	М	Lasalle			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the:	Northern	District of Illinois			
			(State)			
Case number (If known)						
Official	Form 106D			_		Check if this is an amended filing
Schedu	ıle D: Credi	tors Who Hav	ve Claims Secure	ed by Prop	erty	12/15
more space is			e are filing together, both are equals ber the entries, and attach it to t			
1. Do any o	creditors have claims	secured by your propert	y?			
<b>✓</b> No. (	Check this box and sub	mit this form to the court w	vith your other schedules. You hav	ve nothing else to repo	ort on this form.	
Yes.	Fill in all of the informati	on below.				
Part 1: List	All Secured Claims					
for each of	laim. If more than one cr		ed claim, list the creditor separately list the other creditors in Part 2. As to the creditor's name.	Column A  Amount of claim  Do not deduct the value of collateral	Column B Value of collateral	Column C Unsecured portion If any

this claim

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Fill in this	information to identify your ca	ase:			
Debtor 1	Neenah	М	Lasalle		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if f	iling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	Northern	District of Illinois (State)		
Case nun (If known)	nber				
Officia	al Form 106E/F				Check if this is an amended filing
Sche	edule E/F: Cre	ditors Who	<b>Have Unsec</b>	ured Claims	12/1
other part Form 106 claims that the entrie known).	y to any executory contracts A/B) and on Schedule G: Exe at are listed in Schedule D: C	or unexpired leases that cutory Contracts and Un reditors Who Hold Claim tach the Continuation Pa	nt could result in a claim. A Dexpired Leases (Official Fo Des Secured by Property. If m	Iso list executory contracts rm 106G). Do not include an lore space is needed, copy t	NONPRIORITY claims. List the on Schedule A/B: Property (Official y creditors with partially secured he Part you need, fill it out, number rite your name and case number (if
1. Do a	any creditors have priority un	secured claims against	vou?		
V	No. Go to Part 2.	· ·	•		
	Yes.				
liste As n	d, identify what type of claim it i	s. If a claim has both prior in alphabetical order acco	ity and nonpriority amounts, rding to the creditor's name.	list that claim here and show b If you have more than two pric	arately for each claim. For each claim oth priority and nonpriority amounts. rity unsecured claims, fill out the

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total

claim

Priority

amount

Nonpriority

amount

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Debto	r 1 Neenah First Name	M Middle Name	Lasalle Last Name	Case number (if k	nown)	
Part 2	List All of Your NONPRIO	RITY Unsecured CI	aims			
	o any creditors have nonpriority  No. You have nothing to repo  Yes.  st all of your nonpriority unsecu	rt in this part. Submit t	his form to the co	·	plaim. If a creditor has more	than one priority
u If	nsecured claim, list the creditor sep more than one creditor holds a parage of Part 2.	arately for each claim. For	or each claim listed	, identify what type of claim it is	. Do not list claims already in	cluded in Part 1.
						Total claim
4.1	AMER COLL CO Nonpriority Creditor's Name 919 W ESTES			t 4 digits of account number en was the debt incurred?	8027 12/2010	\$300.00
	Number Street  SCHAUMBURG Illinois City State  Who incurred the debt? Check of Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this claim relates to the claim subject to offset?  No Yes	Zip Code one. d another		of the date you file, the claim Contingent Unliquidated Disputed e of NONPRIORITY unsecured Student loans Obligations arising out of a sep divorce that you did not report a Debts to pension or profit-shari debts Collection; Other. Specify ORIGINAL CREE	I claim:  aration agreement or as priority claims ng plans, and other similar  Collecting for	
4.2	AMER FST FIN			t 4 digits of account number	0001	\$600.00
	Nonpriority Creditor's Name 3515 N. Ridge Rd, Suite 200 Number Street  Wichita Kansa City State Who incurred the debt? Check of Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this claim relates to the claim subject to offset?  No Yes	Zip Code one. d another	Who	en was the debt incurred?  of the date you file, the claim Contingent Unliquidated Disputed e of NONPRIORITY unsecured Student loans Obligations arising out of a sep divorce that you did not report a Debts to pension or profit-sharidebts	3/2015 is: Check all that apply. I claim: aration agreement or as priority claims	
4.3	AMERI FIN  Nonpriority Creditor's Name  10333 N Meridian St  Number Street  Indianapolis Indian City State  Who incurred the debt? Check of Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this claim relates to the claim subject to offset?  No Yes	Zip Code one. d another	As o	t 4 digits of account number en was the debt incurred?  of the date you file, the claim Contingent Unliquidated Disputed the of NONPRIORITY unsecured Student loans Obligations arising out of a sep divorce that you did not report a Debts to pension or profit-sharidebts Other. Specify Repo & Surres	I claim: aration agreement or as priority claims ng plans, and other similar	\$5,427.00

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Debtor 1 Neenah M Lasalle Case number (if known)
First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

rait 2	Your NONPRIORITY Unsecured Claims - Continuati	ion rage	
	After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
4.4	City of Chicago - Parking and red Light Tickets	— Last 4 digits of account number	\$400.00
	Nonpriority Creditor's Name Department of Revenue - PO Box 88292	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		— Contingent	
	Obligation	Unliquidated	
	Chicago Illinois 60680 City State Zip Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	Student loans	
	Debtor 2 only	Obligations arising out of a separation agreement or	
	Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	✓ Other. Specify DL #: L240-6339-0718	
	Is the claim subject to offset?	_	
	✓ No		
	Yes		
4.5	CONVERGENT OUTSOURCING	Last 4 digits of account number1525	\$228.00
	Nonpriority Creditor's Name Po Box 9004	When was the debt incurred? 2/2015	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		— Contingent	
	Dealer West-bases 00057	Unliquidated	
	Renton Washington 98057 City State Zip Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	Student loans	
	Debtor 2 only	Obligations arising out of a separation agreement or	
	Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	Other. Specify Collection: COMCAST	
	Is the claim subject to offset?		
	<u>✓</u> No		
	Yes		
4.6	CREDIT CONTROL SERVICE	— Last 4 digits of account number 8262	\$137.00
	Nonpriority Creditor's Name 725 CANTON ST	When was the debt incurred? 8/2016	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		— Contingent	
		Unliquidated	
	NORWOOD Massachusetts 02062 City State Zip Code	Disputed	
	Who incurred the debt? Check one.  Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	<u> </u>	Student loans	
	Debtor 2 only  Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	<u>'</u>	divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar	
	At least one of the debtors and another	debts	
	Check if this claim relates to a community debt	Other. Specify Collection: PROGRESSIVE	
	Is the claim subject to offset?  No		
	Yes		

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DEPT OF ED/NAVIENT Nonpriority Creditor's Name PO BOX 9635	Last 4 digits of account number 0529 When was the debt incurred? 5/2008	\$1,271.00
Number Street	As of the date you file, the claim is: Check all that apply.  Contingent	
WILKES BARRE Pennsylvania 18773 City State Zip Code	Unliquidated	
Who incurred the debt? Check one.  Debtor 1 only	Disputed Type of NONPRIORITY unsecured claim:	
Debtor 2 only  Debtor 1 and Debtor 2 only	Student loans  Obligations arising out of a separation agreement or	
At least one of the debtors and another	divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar	
Check if this claim relates to a community debt  Is the claim subject to offset?  No	debts Other. Specify	
Yes		
ENHANCED RECOVERY CO L Nonpriority Creditor's Name 8014 BAYBERRY RD	Last 4 digits of account number 7616 When was the debt incurred? 8/2014	\$772.00
Number Street	As of the date you file, the claim is: Check all that apply.  Contingent	
JACKSONVILLE Florida 32256	Unliquidated	
City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only	Disputed Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans  Obligations arising out of a separation agreement or	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar	
Check if this claim relates to a community debt Is the claim subject to offset?  No	debts  Other. Specify Collection: SPRINT	
Yes		
FIRST PREMIER BANK Nonpriority Creditor's Name Jefferson Capital Systems, LLC PO Box 7999	Last 4 digits of account number 3550 When was the debt incurred? 1/2015	\$427.00
Number Street c/o Kelly Lukason	As of the date you file, the claim is: Check all that apply.  Contingent	
Saint Cloud         Minnesota         56302           City         State         Zip Code	Unliquidated	
Who incurred the debt? Check one.  Debtor 1 only	Disputed  Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	

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Lasalle Debtor 1 Neenah M Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Loyola Medical Center \$100.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 3021 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 53207 Milwaukee Wisconsin City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify \_\_\_ medical bills Is the claim subject to offset? **✓** No Yes PLS Loan Store 4.11 \$500.00 Last 4 digits of account number \_ Nonpriority Creditor's Name 3908 Harlem Ave When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Lyons Illinois 60534 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ payday loan Is the claim subject to offset? **✓** No Yes West Suburban Hospital Medical Center 4.12 \$2,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3 Erie Street n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Oak Park 60302 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ medical bills Is the claim subject to offset? **✓** No

Yes

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Lasalle Debtor 1 Neenah M Case number (if known) Middle Name First Name Last Name Part 3: List Others to Be Notified About a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Sprint On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check P.O. Box 219554 Line 4.8 Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Kansas City Missouri 64121 Last 4 digits of account number 7616 Zip Code City State Comcast On which entry in Part 1 or Part 2 did you list the original creditor? 11621 E. Marginal Way # 5 of (Check Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Claims Washington 98168 Seattle Last 4 digits of account number 1525 City Zip Code Progressive On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check 6300 Wilson Mills Rd. Line 4.6 Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Claims Cleveland Ohio 44143 Last 4 digits of account number City Zip Code State HARRIS & HARRIS LTD

Line 4.4

60604

Zip Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured

of (Check

one):

Last 4 digits of account number

111 W JACKSON BLVD S-400

Street

Illinois

State

Number

**CHICAGO** 

City

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Debtor 1 Neenah M Lasalle Case number (if known)

#### Middle Name First Name Last Name Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$1,271.00 **Total claims** 6f. Student loans from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar \$10,891.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$12,162.00 6j. Total. Add lines 6f through 6i.

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Fill in this information to identify your case:							
Debtor 1	Neenah	М	Lasalle				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		Northern	District of Illinois (State)				
Case number (If known)							

#### Official Form 106G

	Check if this is an
_	amended filing

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or comp	pany with whom you have	the contract or lease	State what the contract or lease is for
2.1	WJ Managemen	t		Other, Other,
	Name			landlord
	5225 West Mad	ison Street		
	Number	Street		
	Chicago	Illinois	60644	
	City	State	Zip Code	

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		Doc	ament rage.	<b>31</b> 01 <b>00</b>
Fill in this in	formation to identify your c	ase:		
Debtor 1	Neenah	М	Lasalle	
Debtor 2	First Name	Middle Name	Last Name	
(Spouse, if filin	g) First Name	Middle Name	Last Name	
United State	es Bankruptcy Court for the:	Northern	District of Illinois	
Case numb	er		(State)	
				Check if this is a amended filing
Officia	al Form 106H			
	ule H: Your Cod	lebtors		12/1
1. Do you	wer every question.  I have any codebtors? (If yo lo	u are filing a joint case, do r	not list either spouse as a c	odebtor.)
2. Within Idaho,		ico, Puerto Rico, Texas, Wa	shington, and Wisconsin.)	Community property states and territories include Arizona, California, e?
		y state or territory did you	live?	_ Fill in the name and current address of that person.
	Name of your spouse, for	ormer spouse, or legal equiv	alent	<del></del>
	Number Street			<del></del>
	City	State	Zip Code	<u> </u>

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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				. ago oz			
Fill in this	s information to identify	your case:					
Debtor 1	Neenah	М	Lasalle	9			
	First Name	Middle Name	Last N	ame	- Che	eck if this is:	
Debtor 2	filing) First Name	Middle Name	Last N	amo	- I п	An amended filing	
						A supplement showing post-petition cl	napter 1
the:	ates Bankruptcy Court for	Northern	District of III	inois State)	-   "	expenses as of the following date:	
Case num	nber				_	MM / DD / 2000/	
(II KIIOWII)						MM / DD / YYYY	
<u>Officia</u>	al Form 106I						
Sched	dule I: Your In	come					12/1
information spouse. If number (i	on about your spouse. I	f you are separated an I, attach a separate she y question.	d your spou	se is not filing	with you, do	ir spouse is living with you, includ not include information about yo ional pages, write your name and	ur
	your employment nation.		Debtor 1			Debtor 2	
		Employment status	<b>✓</b> Emplo	yed		Employed	
attach	have more than one job, a separate page with		Not E	mployed		Not Employed	
inform emplo	nation about additional byers.	Occupation				_	
Includ	le part time, seasonal, or	Employer's name	Dicks Spo	rting Goods Distr	ibution Center		
self-er	mployed work.	Employer's address	<del></del>		ibation ocitici		
	pation may include student memaker, if it applies.	Employer 3 dadress	Number St	ommerce Drive reet		Number Street	
			Atlanta	Georgia	30344		
			City	State	Zip Code	City State Zip Co.	de
		How long employed there?	1 year				
Part 2:	Give Details About N	Monthly Income					
spouse u	unless you are separated.		-			write \$0 in the space. Include your non	_
	ace, attach a separate she		, combine the			For Debtor 2 or	rieca
				For D	ebtor 1	non-filing spouse	
	monthly gross wages, sala uctions.) If not paid monthly			2.	\$1,904.22		
3. <b>Esti</b>	mate and list monthly over	rtime pay.		3.	+ \$0.00		
4. Calo	<b>culate gross income.</b> Add li	ine 2 + line 3.		4.	\$1,904.22		

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Debte	or 1Neenah		Lasalle	Case number	er <i>(if</i>		
	First Name	Middle Name	Last Name	known) For Debtor 1	For Debtor 2 or non-filing spouse		
Cop	py line 4 here		<b>→</b> 4.	\$1,904.22			
5. <b>Lis</b>	t all payroll deduc						
5a	. Tax, Medicare, a	nd Social Security deductions	5a.	\$230.64			
5b	. Mandatory contr	ibutions for retirement plans	5b.	\$0.00			
5c	. Voluntary contrib	outions for retirement plans	5c.	\$0.00			
5d	. Required repaym	nents of retirement fund loans	5d.	\$0.00			
5e	. Insurance		5e.	\$0.00			
5f.	Domestic support	t obligations	5f.	\$0.00			
5g	. Union dues		5g.	\$0.00			
5h	. Other deduction	s. Specify:	5h. +	\$0.00	+		
6. <b>Add</b> +5h.	d the payroll dedu	ctions. Add lines 5a + 5b + 5c + 5d + 5e +5	f + 5g 6.	\$230.64			
7. <b>Cal</b>	culate total mont	hly take-home pay. Subtract line 6 from line	e 4. 7.	\$1,673.58			
8. Lis	t all other income	regularly received:					
8a	business, profess	•					
		t for each property and business showing linary and necessary business expenses, and net income.	l 8a.	\$0.00			
8b	. Interest and divid	dends	8b.	\$0.00			
8c.	. Family support p dependent regula	ayments that you, a non-filing spouse, or arly receive	а				
		pousal support, child support, maintenance, , and property settlement.	8c.	\$0.00			
8d	. Unemployment o	compensation	8d.	\$0.00			
	. Social Security		8e.	\$0.00			
8f.	Include cash assist cash assistance that	at assistance that you regularly receive tance and the value (if known) of any non- at you receive, such as food stamps (benefits nental Nutrition Assistance Program) or	S 8f.	\$0.00			
8g	. Pension or retire	ement income	8g.	\$0.00			
8h	. Other monthly in	come. Specify:	8h. +	\$0.00	+		
9. <b>Ad</b>	d all other income	Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g	+ 8h. 9.	\$0.00			
		ncome. Add line 7 + line 9. 10 for Debtor 1 and Debtor 2 or non-filing s	10. pouse	\$1,673.58	+ =	=	\$1,673.58
In o	clude contributions ends or relatives.	lar contributions to the expenses that yo from an unmarried partner, members of your nounts already included in lines 2-10 or amo	household, you	r dependents, your room	,		
Sp	ecify:				1	11. +	\$0.00
		the last column of line 10 to the amount in the Summary of Schedules and Statistical Su				12.	\$1,673.58
13. <b>D</b>	o you expect an in	crease or decrease within the year after	you file this for	m?		·	Combined monthly income
	Yes. Explain:						

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		Docu	ment Page 34 of 68	3	
Fill in this infor	mation to identify your	case:			
Debtor 1	Neenah First Name	M Middle Name	Lasalle Last Name		
Debtor 2 (Spouse, if filing)				Check if this is:  An amended filing	α
	First Name  Bankruptcy Court for the	Middle Name :: Northern E	Last Name District of Illinois	A supplement sh	owing post-petition chapter 13
Case number	amapto, court or are		(State)	expenses as of the	ne following date:
(If known)				MM / DD / YYYY	
Official	Form 106J				
Schedul	e J: Your Exp	oenses			12/15
information. If (	•	, attach another sheet to this	re filing together, both are equal form. On the top of any addition		
1. Is this a joi	nt case?				
✓ No. Go	to line 2				
Yes. Do	oes Debtor 2 live in a	separate household?			
	No Yes. Debtor 2 must t	file Official Forms 106J-2. <i>Exper</i> i	nses for Separate Household of Deb	tor 2.	
2. Do you have	e dependents?				
Do not list D Debtor 2.	ebtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	d your	No Yes			
Part 2: Estir	nate Your Ongoing	Monthly Expenses			
	of a date after the ban		ou are using this form as a suppl plemental Schedule J, check the		
	•	cash government assistance i it on Schedule I: Your Income	-		Your expenses
	or home ownership e	xpenses for your residence. In	clude first mortgage payments and		<b>\$750.00</b>

\$0.00

\$0.00

\$0.00

\$0.00

4a

4b.

4c.

4d.

If not included in line 4: 4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 M
 Lasalle
 Case number (if known)

 Last Name
 Middle Name
 Last Name

riist Name	Middle Name Last Name		
			Your expenses
5. Additional mortgage payments	for your residence, such as home equity loans	5.	\$0.00
6. Utilities:			
6a. Electricity, heat, natural gas		6a.	\$115.00
6b. Water, sewer, garbage collect	ion	6b.	\$0.00
6c. Telephone, cell phone, Intern	et, satellite, and cable services	6c.	\$175.00
6d. Other. Specify:		6d	\$0.00
7. Food and housekeeping supplied		7.	\$300.00
8. Childcare and children's educa	tion costs	8.	\$0.00
9. Clothing, laundry, and dry clear	ning	9.	\$80.00
10. Personal care products and s	ervices	10.	\$80.00
11. Medical and dental expenses		11.	\$0.00
12. <b>Transportation.</b> Include gas, m Do not include car payments	aintenance, bus or train fare.	12.	\$300.00
13. Entertainment, clubs, recreat	ion, newspapers, magazines, and books	13.	\$0.00
14. Charitable contributions and	religious donations	14.	\$0.00
15. <b>Insurance.</b> Do not include insurance deducte	ed from your pay or included in lines 4 or 20.		
15a. Life insurance		15a	\$0.00
15b. Health insurance		15b	\$0.00
15c. Vehicle insurance		15c	\$0.00
15d. Other insurance. Specify:		15d	\$0.00
16. Taxes. Do not include taxes dec	lucted from your pay or included in lines 4 or 20.		
Specify:		16	\$0.00
17. Installment or lease payments	S	10	
17a. Car payments for Vehicle 1		17a	\$0.00
17b. Car payments for Vehicle 2		17b	\$0.00
17c. Other. Specify:		17c	\$0.00
17d. Other. Specify:		17d	\$0.00
	nintenance, and support that you did not report as deducted from , Your Income (Official Form 106I).	40	\$0.00
	support others who do not live with you.	18.	
Specify:	appoint others who do not live with you.	19.	\$0.00
	not included in lines 4 or 5 of this form or on Schedule I: Your Income.	10.	
20a. Mortgages on other propert		20a	\$0.00
20b. Real estate taxes.		20b	\$0.00
20c. Property, homeowner's, or	renter's insurance	20c	\$0.00
20d. Maintenance, repair, and up	keep expenses.	20d	\$0.00
20e. Homeowner's association o	r condominium dues	20e	\$0.00

Official Form 106J Schedule J: Your Expenses page 2

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Debtor 1 Neenah	M		Lasalle	Case number (if known)		
First Nam	e M	liddle Name	Last Name			
21. Other. Specify	:				21	\$0.00
•	ur monthly expenses.					\$1,800.00
22a. Add lines	· ·					\$0.00
, ,	22 (monthly expenses for	,,				\$1,800.00
	22a and 22b. The result is	your monthly expe	enses.		22.	
23. Calculate you	r monthly net income.					
23a. Copy line	12 (your combined month	hly income) from S	chedule I.		23a	\$1,673.58
23b. Copy you	ir monthly expenses from	line 22 above.			23b	\$1,800.00
	our monthly expenses from		come.			(\$126.42)
The resul	t is your monthly net incor	me.			23c	
mortgage pay No Yes	do you expect to finish payment to increase or decrea					

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Fill in this information to identify your case:							
Debtor 1	Neenah	М	Lasalle				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	_			
Case number (If known)							

#### Official Form 106Dec

### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below						
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?						
	✓ No						
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).					
	Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules filed with this declaration and					
×	/s/ Neenah Lasalle	×					
	Signature of Debtor 1	Signature of Debtor 2					
	Date 6/21/2017	Date					
	MM/DD/YYYY	MM/DD/YYYY					

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			Boodinone	. ago <b>o</b> o o	_		
Fill in this info	rmation to identify your	case:					
Debtor 1	Neenah	М	Lasalle				
Dobtor 0	First Name	Middle Na	ame Last Nam	е			
Debtor 2 (Spouse, if filing)	First Name	Middle Na	ame Last Nam	<u> </u>			
United States	Bankruptcy Court for the	e: Northern	District of Illino (State				
Case number (If known)				<del></del> -			
Official	Form 107				_		Check if this amended filing
Stateme	ent of Financi	al Affairs fo	r Individuals	Filing for	· Bankrı	ıptcy	0
			rried people are filing				
	n more space is need nown). Answer every	•	rate sheet to this form	. On the top of	any additio	mai pages, write	your name and case
City	- Dataila Abaut Vau	Marrital Status a	nd Ween Verringe	Defess			
Part 1: GIV	e Details About You	r Maritai Status a	nd Where You Lived	Ветоге			
1. What is	your current marital s	status?					
□ Ma	arried						
<b>–</b>	t married						
<b>V</b>	rmariod						
2. During	the last 3 years, have	you lived anywhere o	other than where you liv	e now?			
☐ No							
Ye	s. List all of the places	you lived in the last 3	3 years. Do not include v	vhere you live n	IOW.		
De	btor 1:		Dates Debtor 1 lived	Debtor 2:			Dates Debtor 2 lived
			there	200101 21			there
				Same as	Debtor 1		Same as Debtor 1
				Same as	Deptor I		Same as Debior 1
	16 Ridgeland Ave		From	No cas la sur Otros	_1		From
Nu	mber Street		To 08/2015	Number Stre	et		
_			00/2010				
Bei Cit	rwyn Illinois y State	60402 Zip Code		City	State	Zip Code	
	, claic	p			Debtor 1	p	Same as Debtor 1
					202101		came as poster :
Nu	mber Street		From	Number Stre	<u>ot</u>		From
140	mber effect		То				
Cit	y State	Zip Code		City	State	Zip Code	
	,	1 2 - 2		- 9		1	
		-		-			Community property states
ana territo	ories include Arizona, Cal	ifornia, Idano, Louisia	na, Nevada, New Mexico,	Puerto Rico, Te	kas, wasningto	on, and wisconsin	.)
<b>✓</b> No							
Yes.	Make sure you fill out	Schedule H: Your C	odebtors (Official Form	106H).			

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Lasalle

М

Debtor 1 Neenah Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$8213.24 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$18985.00 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$18000.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: \$57 monthly from Link \$114.00 For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

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Lasalle Debtor 1 Neenah М Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment

City

State

Zip Code

Suppliers or vendors
Other

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or 1	Neenah		М		salle	Case number	(if known)
	First Name		Middle Name	Las	st Name		
nsi con age	ders include your i porations of which	relatives; a you are a for a busin	ny general partner n officer, director, ess you operate a	s; relatives of any person in control,	general partners; partners or owner of 20% o	tnerships of which y r more of their voting	who was an insider? rou are a general partner; g securities; and any managing r domestic support obligations,
V	No Yes. List all payr	ments to s	an insider				
Ш	res. List all pays	TICHES TO E	arringider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	der? ude payments on No Yes. List all payr	_	ranteed or cosigne t benefited an ins	·	Total amount paid	Amount you still owe	Reason for this payment  Include creditor's name
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	CILY	Jiaic	ZIP OUUE				

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Lasalle Debtor 1 Neenah Case number (if known) Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished.

City

State

Zip Code

Property was attached, seized, or levied.

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Debt	tor 1	Neenah	M	Lasalle	Case number (if know)	7)	
		First Name	Middle Name	Last Name		,	
11.		thin 90 days before you fi counts or refuse to make		l any creditor, including a b ou owed a debt?	ank or financial institution	, set off any amοι	unts from your
	<b>V</b>	No					
		Yes. Fill in the details.					
	ш	1 es. I III II I II e details.					
				Describe the action the	e creditor took	Date action was taken	Amount
		Creditor's Name		-			
		Number Street					
				Last 4 digits of account i	number: XXXX-		
		City State	Zip Code	•			
12.		thin 1 year before you file pointed receiver, a custo		any of your property in the	possession of an assignee f	or the benefit of	creditors, a court-
		No					
	¥	Yes					
	Ц						
Part	5:	List Certain Gifts and	d Contributions				
13.	Wi	ithin 2 years hefore you f	iled for bankruptov die	d you give any gifts with a to	otal value of more than \$60	0 ner nerson?	
10.	***	itiliii 2 years belore you i	med for bankruptcy, die	a you give any gints with a to	otal value of more than 400	o per person:	
	✓	No					
		Yes. Fill in the details for	or each gift.				
		Gifts with a total value per person	of more than \$600	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Ga	ave the Gift	-			
				-			
				_			
		Number Street					
		City State	Zip Code	-			
		Person's relationship to y	/ou				
				_			
		Person to Whom You Ga	ave the Gift				
				-			
		Number Street		-			
		-		_			
		City State	·				
		Person's relationship to y	/ou				

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Debtor 1	Neenah	M	Lasalle Case r	number (if known)		
	First Name	Middle Name	Last Name			
4. Wit	hin 2 years before you filed	d for bankruptcy, did	you give any gifts or contributions with a	total value of r	nore than \$600	to any charity?
	No					
✓						
	Yes. Fill in the details for e	ach gift or contributi	on.			
	Gifts or contributions to	charities	Describe what you contributed		Date you	Value
	that total more than \$600		Docoribo Wilat you contributed		contributed	Tuluo
						-
	Charity's Name					
			_			
	Number Street		-			
	Number Street					
	City State	7in Codo	-			
	City State	Zip Code				
	1110					
art 6:	List Certain Losses					
gar ✓	nbling? No Yes. Fill in the details.					
	Describe the property you	u lost and	Describe any insurance coverage for	the loss	Date of your	Value of property
	how the loss occurred		Include the amount that insurance has	paid. List	loss	lost
			pending insurance claims on line 33 of	Schedule		
			A/B: Property.			
art 7·	<b>List Certain Payments</b>	or Transfers				
	No		r credit counseling agencies for services requ	•	, ,	
<b>✓</b>	Yes. Fill in the details.					
			Description and value of any property	ı	Date payment	Amount of
			Description and value of any property transferred	<i>'</i>	Date payment or transfer	Amount of payment
				′		Amount of payment
	Semrad Law Eirm		transferred	<b>'</b>	or transfer was made	payment
	Semrad Law Firm			′	or transfer	
	Person Who Was Paid		transferred	,	or transfer was made	payment
	Person Who Was Paid 20 S. Clark Street		transferred	,	or transfer was made	payment
	Person Who Was Paid		transferred	,	or transfer was made	payment
	Person Who Was Paid 20 S. Clark Street		transferred	•	or transfer was made	payment
	Person Who Was Paid 20 S. Clark Street Number Street 28th Floor	2000	transferred		or transfer was made	payment
	Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois	60603	transferred		or transfer was made	payment
	Person Who Was Paid 20 S. Clark Street Number Street 28th Floor	60603 Zip Code	transferred		or transfer was made	payment
	Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois  City State		transferred		or transfer was made	payment
	Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois City State  Email or website address		transferred		or transfer was made	payment
	Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois City State  Email or website address None	Zip Code	transferred		or transfer was made	payment
	Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois City State  Email or website address	Zip Code	transferred		or transfer was made	payment
	Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois City State  Email or website address None	Zip Code	transferred		or transfer was made	payment
	Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois City State  Email or website address None	Zip Code	transferred		or transfer was made	payment
	Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois City State  Email or website address None Person Who Made the Payr	Zip Code	transferred		or transfer was made	payment
	Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois City State  Email or website address None Person Who Made the Payr	Zip Code	transferred		or transfer was made	payment
	Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois  City State  Email or website address None  Person Who Made the Payr	Zip Code	transferred		or transfer was made	payment
	Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois  City State  Email or website address None  Person Who Made the Payr	Zip Code	transferred		or transfer was made	payment
	Person Who Was Paid 20 S. Clark Street Number Street  28th Floor Chicago Illinois City State  Email or website address None Person Who Made the Payr  Person Who Was Paid  Number Street	Zip Code	transferred		or transfer was made	payment
	Person Who Was Paid 20 S. Clark Street Number Street  28th Floor  Chicago Illinois  City State  Email or website address None  Person Who Made the Payr	Zip Code	transferred		or transfer was made	payment
	Person Who Was Paid 20 S. Clark Street Number Street  28th Floor Chicago Illinois City State  Email or website address None Person Who Made the Payr  Person Who Was Paid  Number Street  City State	Zip Code	transferred		or transfer was made	payment
	Person Who Was Paid 20 S. Clark Street Number Street  28th Floor Chicago Illinois City State  Email or website address None Person Who Made the Payr  Person Who Was Paid  Number Street	Zip Code	transferred		or transfer was made	payment
	Person Who Was Paid 20 S. Clark Street Number Street  28th Floor Chicago Illinois City State  Email or website address None Person Who Made the Payr  Person Who Was Paid  Number Street  City State	Zip Code ment, if Not You Zip Code	transferred		or transfer was made	payment

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Jebtor '	Neenah	М	Lasalle	Case nur	mber <i>(if known)</i>	
	First Name	Middle Name	Last Name	<del>-</del>		
he	thin 1 year before you filed for the pour deal with your credito not include any payment or tree.	rs or to make paym		ur behalf pay	or transfer any property to	anyone who promised to
<b>✓</b>	No Yes. Fill in the details.					
	•		Description and value of a transferred	ny property	Date payment or transfer was made	Amount of payment
	Person Who Was Paid		-			
	Number Street		-			
	City State	Zip Code	-			
th	e ordinary course of your bus	iness or financial a	you sell, trade, or otherwise tr ffairs? security (such as the granting of a			
an	d transfers that you have alread			,		,,,
	No Yes. Fill in the details.					
			Description and value of programmer transferred	r	Describe any property or payments received or debts n exchange	paid transfer was made
	Person Who Received Trans	fer	-			
	Number Street		- -			
	City State Person's relationship to you	Zip Code	-			
	Person Who Received Trans	fer	-			
	Number Street		-			
	City State Person's relationship to you	Zip Code	-			
be	thin 10 years before you filed neficiary?		d you transfer any property to a	ı self-settled	trust or similar device of wi	hich you are a
<u> </u>	<b>.</b>					
			Description and value of	the property	transferred	Date transfer was made
	Name of trust					

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Lasalle Debtor 1 Neenah М \_ Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code

City

State

Zip Code

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Lasalle Debtor 1 Neenah \_ Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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Debt		Neenah		M	Lasalle	Case nur	mber (if known)	
		First Name		Middle Name	Last Name			
26.		e you been a party No	y in any judic	ial or administ	rative proceeding under	any environmental la	aw? Include settlements and o	orders.
	П	Yes. Fill in the det	ails.					
	_				Court or agency	Na	ature of the case	Status of the case
		Case title						Pending
					Court Name			On appeal
		Case number			NumberStreet			Concluded
					City State	Zip Code		
Part	11:	Give Details Ab	oout Your E	Business or C	onnections to Any Bu	ısiness		
27.	With	nin 4 years before	you filed for	bankruptcy, di	d you own a business or	have any of the follow	wing connections to any busin	iess?
		A member of A partner in a	f a limited liab a partnership	oility company (	rade, profession, or othe LLC) or limited liability particles of a corporation	-	ne or part-time	
		An owner of a	at least 5% c	of the voting or	equity securities of a cor	poration		
		_		_		'		
	<b>✓</b>	No. None of the a						
		Yes. Check all that	at apply abov	ve and fill in the	e details below for each I	ousiness.		
					Describe the nat	ure of the business	Employer Identification include Social Security	
		Business Name					EIN:	
		Number Street			_		Dates business existe	d
		City	State	Zip Code	Name of account	ant or bookkeeper	From To	
					Describe the nat	ure of the business	Employer Identification	
		Business Name					EIN:	
		Number Street			— Name of account		Dates business existe	d
		0.1	01-1-	7'- 0- 1-	Name of account	ant or bookkeeper		
		City	State	Zip Code			From To	
					Describe the nat	ure of the business	Employer Identification include Social Security	
		Business Name					EIN:	
		Number Street			Name of account	ant or bookkeeper	Dates business existe	d
		City	State	Zip Code		C. DOMNOOPOI	From To	

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Deb	tor 1 Neenah	M	Lasalle	Case number (if known)
	First Name	Middle Name	Last Name	
28.	Within 2 years before your creditors, or other particle.		ou give a financial stateme	nt to anyone about your business? Include all financial institutions,
	Yes. Fill in the detai	ls below.		
	_		Date issued	
	Nama		MM/DD/YYYY	
	Name		WIN DD/1111	
	Number Street		<del>_</del>	
	City	State Zip Code	_	
		р		
Part	t 12: Sign Below			
1	true and correct. I under	stand that making a false sta	atement, concealing proper	ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	/\$/ No	eenah Lasalle		
	Signature	e of Debtor 1		Signature of Debtor 2
	Date 6/2	21/2017		Date
ı	Did you attach additional	pages to Your Statement of	f Financial Affairs for Individ	luals Filing for Bankruptcy (Official Form 107)?
	No			
i	Yes			
ı	Did you pay or agree to p	ay someone who is not an a	ttorney to help you fill out b	ankruptcy forms?
	<b>✓</b> No			
i	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:						
Debtor 1	Neenah	М	Lasalle			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)			
Case number (If known)			(Gtate)			

Check if this is an amended filing

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral Did you claim the property What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: Retain the property and redeem it. Yes Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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Debtor	Neenah	M	Lasalle	Case number (ii	f
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpired Person	onal Property Leases			
For any informa	unexpired personal property le	ease that you listed in So ate leases. Unexpired le	chedule G: Executory Col ases are leases that are	still in effect; the lea	ed Leases (Official Form 106G), fill in the ase period has not yet ended. You may
Des	scribe your unexpired personal	property leases			Will the lease be assumed?
Les	sor's name: WJ Management				□ No □ Yes
	cription of leased perty: landlord				
Les	sor's name:				□ No □ Yes
	cription of leased perty:				
Les	sor's name:				□ No □ Yes
	cription of leased perty:				
Les	sor's name:				□ No □ Yes
	cription of leased perty:				
Les	sor's name:				□ No □ Yes
	cription of leased perty:				
Les	sor's name:				□ No □ Yes
	cription of leased perty:				
Les	sor's name:				□ No □ Yes
	cription of leased perty:				
Port 2	Sign Below				
Unde			intention about any prop	perty of my estate th	at secures a debt and any personal
×	/s/ Neenah Lasalle		×		
Si	gnature of Debtor 1	_	Signatu	ire of Debtor 2	
Da	ate 6/21/2017 MM/DD/YYYY		Date <u>.</u>	MM/DD/YYYY	

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B2030 (Form 2030) (12/15)

#### **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois

		Northern	District of Illinois		
In re	Neenah M Lasalle		Case	No	
_	Debtor				(If known)
			Chap	ter	Chapter 7
	DISCLOSURE OF				
1.	<ul> <li>Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf</li> </ul>	year before the filing	of the petition in bankruptcy, o	or agreed to be pa	aid to me, for services
	For legal services, I have agreed to a	ccept			\$1,250.00
	Prior to the filing of this statement I	have received			\$0.00
	Balance Due				\$1,250.00
2.	. The source of the compensation paid	d to me was:			
	<b>Debtor</b>	Other (	specify)		
3.	. The source of the compensation paid	d to me is:			
	<b>✓</b> Debtor	Other (	specify)		
4.	I have not agreed to share the abmembers and associates of my I		ensation with any other person	unless they are	
	I have agreed to share the above members or associates of my law the people sharing in the compe	w firm. A copy of the			
5.	. In return for the above-disclosed fee	, I have agreed to ren	der legal service for all aspects o	of the bankruptcy	case, including:
	<ul> <li>a. Analysis of the debtor's finar bankruptcy;</li> </ul>	ncial situation, and re	ndering advice to the debtor in o	determining whet	ther to file a petition in
	b. Preparation and filing of any	petition, schedules, s	statements of affairs and plan w	hich may be requ	iired;
	c. Representation of the debtor	at the meeting of cre	editors and confirmation hearing	g, and any adjourr	ned hearings thereof;
6.	. By agreement with the debtor(s), the	above-disclosed fee	does not include the following:	services:	
		CE	RTIFICATION		
	certify that the foregoing is a completor(s) in this bankruptcy proceedings.	te statement of any a	greement or arrangement for pa	yment to me for r	representation of the
	6/21/2017		/s/ Elizabeth Pla	acek	
	Date		Signature of Atto		
			Semrad Law Fi	irm	
			Name of law fi		

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to:
<a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Lasalle, Neenah M	Case No.		
Debtor(s)		odde No.		
		Chapter.	Chapter7	
	VERIFICATIO	N OF CREDITOR MAT	RIX	
Tł knowledge	he above named Debtors hereby verify that the.	e attached list of creditors is tru	ue and correct to the best of their	
Date:	6/21/2017	/s/ Lasalle, Neena Lasalle, Neenah N Signature of Debt	1	

AMERI FIN 10333 N Meridian St Indianapolis, IN, 46290

DEPT OF ED/NAVIENT PO BOX 9635 WILKES BARRE, PA, 18773

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL, 32256

Sprint P O Box 629023 El Dorado Hills, CA, 95762

AMER FST FIN 3515 N. Ridge Rd, Suite 200 Wichita, KS, 67205

FIRST PREMIER BANK c/o Jefferson Capital Systems LLC PO Box 7999 c/o Linda Dold Saint Cloud, MN, 56302

AMER COLL CO 919 W ESTES SCHAUMBURG, IL, 60193

CONVERGENT OUTSOURCING 10750 HAMMERLY BLVD #200 Houston, TX, 77043

Comcast p.o. box 196 Newark, NJ, 07101

CREDIT CONTROL SERVICE 5757 Phantom Dr Ste 330 Hazelwood, MO, 63042

Progressive 6300 Wilson Mills Rd. Cleveland, OH, 44143 PLS Loan Store 1215 E 87th Street Chicago, IL, 60619

City of Chicago - Parking and red Light Tickets 121 N. LaSalle Street Chicago, IL, 60602

HARRIS & HARRIS LTD 222 Merchandise Mart Plaza, Suite 1900 Chicago, IL, 60654

West Suburban Hospital Medical Center 3 Erie Street Oak Park, IL, 60302

Loyola Medical Center 2160 S. 1st Avenue Maywood, IL, 60153 Case 17-18768 Doc 1 Filed 06/21/17 Entered 06/21/17 16:02:39 Desc Main Document Page 60 of 68

B2030 (Form 2030) (12/15)

### UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Neenah M Lasalle			Case No.	
	Debtor				(If known)
				Chapter	Chapter 7
	DISCLOSURE OF CO				
	Pursuant to 11 U.S.C. § 329(a) and Fed. compensation paid to me within one year rendered or to be rendered on behalf of the second seco				
	For legal services, I have agreed to accept				\$1,250.00
	Prior to the filing of this statement I have	received			\$0.00
	Balance Due				\$1,250.00
2.	The source of the compensation paid to r	me was:		•	
	<b>Debtor</b>	Other (specify	/)		
3.	The source of the compensation paid to r	ne is:			· A
	Debtor	Other (specify	<i>r</i> )		
4.	I have not agreed to share the above- members and associates of my law fir	disclosed compensation.	on with any other pe	erson unless they	are
COPPLEMENT	I have agreed to share the above-disc members or associates of my law firm the people sharing in the compensation	I. A CODY OF THE AGREEN	vith a other person on ment, together with a	or persons who a I list of the name:	re not s of
5. 1	n return for the above-disclosed fee, I have	e agreed to render lea	al service for all asn	ects of the hankr	sustau asas inakedinae
	<ul> <li>a. Analysis of the debtor's financial s bankruptcy;</li> </ul>	situation, and rendering	g advice to the debto	or in determining	whether to file a petition in
	b. Preparation and filing of any petition	on, schedules, stateme	ents of affairs and pl	an which may be	required;
	c. Representation of the debtor at the				
6. E	By agreement with the debtor(s), the above				, J
		CERTIFIC	ATION		
l ce debtor	ertify that the foregoing is a complete stat (s) in this bankruptcy proceedings.	ement of any agreeme	nt or arrangement fo	or payment to me	for representation of the
	6/21/2017		/s/ Elizabet	th Placek	
	Date		Signature o		
			Comment	OLL Circus	
	M-Viyana	78-11	Semrad La Name of I		
		5	A:	: !	
			100 market	-	

# CaSONTRAC POOR FILE CONTAIN DOCUMENT PROPERTY REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1250.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$31.00 Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

17-Neenah M Lasalle

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As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 6/21/2017

Client \_\_\_\_\_ Client \_\_\_\_

Attorney \_\_\_\_\_

17-Neenah M Lasalle DN\_\_\_\_

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Debtor 1 Neenah First Name		Lasalle	Case number (if known)	
SPACE AND ADDRESS OF THE PARTY		Last Name	· · · · <u>-</u>	
SPAZENCE CONTRACTOR CONTRACTOR	uestions for Reporting Purposes	consumer debts? Cor primarily for a personal business debts? Businal	nsumer debts are defining in the second of the second of the second of the busine operation of the busine operation of the busine operation.	purpose." at you incurred to obtain siness or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	No. I am not filing under Chapter  Yes. I am filing under Chapter expenses are paid that fu  No. Yes.	7. Do you estimate that af	ter any exempt property stribute to unsecured cre	is excluded and administrative editors?
18. How many creditors do you estimate that you owe?	<ul><li>✓ 1-49</li><li>☐ 50-99</li><li>☐ 100-199</li><li>☐ 200-999</li></ul>	1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$ \$10,000,001-\$ \$50,000,001-\$ \$100,000,001	\$50 million   T	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be? Part 7: Sign Below	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$- \$10,000,001-\$ \$50,000,001-\$ \$100,000,001	\$50 million T	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
	I have examined this petition, and correct.  If I have chosen to file under Cha of title 11, United States Code. If under Chapter 7.  If no attorney represents me and out this document, I have obtained I request relief in accordance with I understand making a false state connection with a bankruptcy case both. 18 U.S.C. §§ 152, 1341, 15  **  **  **  **  **  **  **  **  **	upter 7, I am aware that I understand the relief avunderstand the relief avunderstand the notice read and read the notice reat the chapter of title 11, ment, concealing prope se can result in fines up 519, and 3571.	may proceed, if eligibly allable under each charpon pay someone who is required by 11 U.S.C. § United States Code, so	ie, under Chapter 7, 11,12, or 13 pter, and I choose to proceed not an attorney to help me fill 342(b). specified in this petition. By or property by fraud in sonment for up to 20 years, or

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Debtor 1	Neenah	М	Lasalle
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filling)	First Name	Middle Name	Last Name
United States I	Bankruptcy Court for the:	Northern	District of Illinois
Case number If known)			(State)

Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Park is Sign Below	
Did you pay or agree to pay someone who is NOT an attorney to	help you fill out bankruptcy forms?
<b>☑</b> No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules filed with this declaration and
X /s/Neenah Lasalle	×
Signature of Debtor 1	Signature of Debtor 2
Date 6/21/2017 MM/DD/YYYY	Date MM/DD/YYYY

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			Document 1 c	190 00 01 00
Debtor 1	Neenah First Name	М	Lasalle	Case number (if known)
	ruschang	Middle Name	Last Name	- Coo Tambel (a room)
28. Wit cre	hin 2 years before you filed ditors, or other parties.	for bankruptcy, did	you give a financial state	ment to anyone about your business? Include all financial institutions
Z	No			
	Yes. Fill in the details below	N.		
			Date issued	
	Name		MM/DD/YYYY	
	Number Street	<u></u>	<del>-</del>	
	City State	Zip Code	Mirror Control	
end do.	Sign Below	/		
1- al L 1/2-	Oldit pelow	_/		
true a a ban	kruptcy case can result in t	fines up to \$250,000,	tement, concealing prop or imprisonment for up t	ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with 0 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signature of Debt	lor 1	······································	Signature of Debtor 2
	Date 6/21/2017			Date
Did yo	u attach additional pages t	o Your Statement of	Financial Affairs for India	viduals Filing for Bankruptcy (Official Form 107)?
Z No				reaction and the Danki upter (Official Form 107)?
II Ye	%s			
Did yo	u pay or agree to pay some	one who is not an at	torney to help you fill out	bankruptcy forms?
No.				
[] Ye	s. Name of person			Attach the Bankruptcy Petition Preparer's Notice,

Declaration, and Signature (Official Form 119).

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Debtor Neenah	M	Lasalle	Coop of make an use
1 First Name	Middle Name	Last Name	Case number (if
Park2 List Your Unexpired Pe	rsonal Property Leas	es	known)
For any unexpired personal proper information below. Do not list real assume an unexpired personal pro	ty lease that you listed in estate leases. Unexpired perty lease if the trustee	Schedule G: Executory I leases are leases that	Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may
Describe your unexpired person		does not assume it. 11	U.S.C. § 365(p)(2).  Will the lease be assumed?
Lessor's name: WJ Managemer			la No
Description of leased property: landlord			Yes
Lessor's name:			No Yes
Description of leased property:			Suveril
Lessor's name:			MO No
Description of leased property:			No recent)
			No Yes
Description of leased property:			
Lessor's name:			. No Yes
Description of leased property:			
Lessor's name:  Description of leased	O Samuel Control of the Control of t		☐ No ☐ Yes
property:			
Lessor's name:  Description of leased			No Yes
property:	terreta de destinación de servicio de la companya d	The second secon	
1/	that I have indicated my	intention about any pro	perty of my estate that secures a debt and any personal
X /s/ Neeman Lasalle		×	
Signature of Debtor 1  Date 6/21/2017		Signati Date	are of Debtor 2
/ MM/DD/YYYY		•	MM/DD/YYYY

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### UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Lasalle, Neenah M		
	Debtor(s)	Case No	
		Chapter.	Chapter7
	VERIFIC	CATION OF CREDITOR MATRI	X
knowled	The above named Debtors hereby verifige.	y that the attached list of creditors is true	and correct to the best of their
Date:	6/21/2017	/s/ kasalla, Neenah M	· N. J. J.
		Vasalle, Neenah M Signature of Debtor	

Case 17-18768 Doc 1 Filed 06/21/17 Entered 06/21/17 16:02:39 Desc Main Document Page 68 of 68 Debtor 1 Neenah Lasalle Case number (it known) First Name Middle Name Last Name Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit \$0.00 under the Social Security Act. Instead, list it here: For you \$0.00 For your spouse \$0.00 9.Pension or retirement income. Do not include any amount received that was a \$0.00 benefit under the Social Security Act. 10.Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. Total amounts from separate pages, if any. +\$0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for each \$1,879.45 \$1,879.45 column. Then add the total for Column A to the total for Column B. **Total** current Part 2: Determine Whether the Means Test Applies to You monthly income 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11. Copy line 11 here --\$1,879.45 Multiply by 12 (the number of months in a year). X 12 12b. The result is your annual income for this part of the form. \$22,553.40 13 Calculate the median family income that applies to you. Follow these steps: Illinois Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of \$50,765.00 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? 14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Parker Sign Below

By signing here, I/declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

/s/ Neenah Lasalle

Signature of Debtor 1

ðate. 6/21/2017 MM/DD/YYYY

Signature of Debtor 2

Date 6/21/2017 MM/DD/YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.